1				<u> </u>					<u>/_</u>	10/0		cket Numb	er
	PATENT A	PPLICATIOI Effecti	N FEE DE	TERM r 1, 20	INATIO	N RECOF	RD			-10 5			-
<b>06</b> 411110 110 1 1000								SMAL TYPE	MALL ENTITY OTHER THA				
TOI	AL CLAIMS		56					RATE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			56 minus 20=					X\$ 9=		<i>۹</i> .۷	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		•			X42=		77	OR	X84=	
		DENT CLAIM PI		<u> </u>	$\overline{}$	<b> </b>		9/					
								+140=			OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TO	TAL	130	OR	TOTAL	THAN
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 2)						(Column 3)		SM	ALL 1	ENTITY	OR	OTHER SMALL	
AMENDMENT A	1-31-07	(Column 1) CLAIMS REMAINING AFTER		HIGI NUM PREV	HEST MBER MOUSLY	PRESENT EXTRA		RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		AMENDMENT	Minus		FOR	- /-		XS	9=	//	OR	X\$18=	
	Total Independent	56	Minus	***	<u>-6</u>	= /	l	-	2=	/	1	X84=	7
AM		1 9	MULTIPLE DEPENDENT CLAIM					<b> </b>		<del>                                     </del>	OR		/
									40=.		OR	+280= /	
								TOTAL T. FEE		OR	ADDIT. FEE		
		(Column 1)			umn 2) HEST	(Column 3)	4			ADDI-	7		ADDI-
NT B		CLAIMS REMAINING AFTER AMENDMENT		NU PRE	MBER /IOUSLY D FOR	PRESENT EXTRA		R	ATE	TIONAL FEE		RATE	TIONA
NDMENT	Total	*	Minus	**		=		X	\$ 9=		OR	X\$18=	
AMEN	Independent	*	Minus	***		5		X	42=		OF	X84=	
Z	FIRST PRES	ENTATION OF N	NULTIPLE DEPENDENT CL			A 🔲	L	1	40=	1	OF	200	•
								<u> </u>	TOTAL			TOTA	
								ADD	IT. FEE	:	_ <b>_</b>	ADDIT. FE	E
_	(Column 1) (Column 2) (Column Claims Highest						"	_		ADDI-	7		ADD
AMENDMENT C		REMAINING AFTER AMENDMEN		PRE	JMBER VIOUSLY ND FOR	PRESENT EXTRA		R	ATE	TIONA		RATE	TION
	Total	*	Minus	**		•		×	\$ 9=		OF	X\$18=	:
AMEN	Independent	*	Minus	***	and the second		_	~ \ \	(42=	The state of the s	OI	R X84≒	Marine sie
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OF		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							<u> </u>	TOTA			TOTA	AL.
	If the "Highest!	Number Previoush Number Previoush number Previously	/ Paid For IN I	HIS STA	>⊏ 12 1639 ·	A	20.	ADO	IT. FE		_	ADDII. P	:E <b>L</b>